

Phone Number: _____

Fax Number: _____

E-mail: _____

Current Certification Number (if applicable):

**REGISTRATION FEE
FOR ALL PARTICIPANTS \$400**

PAYMENTS: There will be no rate reduction for partial attendance. Checks should be made payable to **DHEC's Division of Mining and Solid Waste Management**. For Visa, MasterCard and Discover payments, please contact Pete Stevens at **(803) 896-4149**.

Please return this registration form and fees by **October 31, 2006** to:

**S.C. DEPARTMENT OF HEALTH
AND ENVIRONMENTAL CONTROL
Office of Solid Waste Reduction
and Recycling**
ATTN: Pete Stevens
2600 Bull Street
Columbia, SC 29201

**The DEADLINE to register
is October 31, 2006.**

NEARBY LODGING

COMFORT INN
501 Taylor Street
(Taylor at Huger Street)
Columbia, SC 29201
(803) 744-4000

HAMPTON INN
822 Gervais Street
Columbia, SC 29201
(803) 231-2000

EMBASSY SUITES
200 Stoneridge Drive
Columbia, SC 29210
(803) 252-8700

CLARION TOWN HOUSE
1615 Gervais Street
Columbia, SC 29201
(803) 771-8711



DIRECTIONS

Follow the directions below to the S.C. Association of Counties Facility.

- **FROM I-26:** Take I-126 into Columbia. Take the Huger Street exit. Take the first left onto Richland Street. Take the first left onto Thurmond Mall Boulevard. Take the next left and follow to 1919 Thurmond Mall.
- **FROM I-77 OR I-20 WEST:** Take I-277 into Columbia. Turn right on Elmwood Avenue. Take the Huger Street exit. Take the first left onto Richland Street. Take the first left onto Thurmond Mall Boulevard. Take the next left and follow to 1919 Thurmond Mall.

NOTE: Free parking is available in the adjacent lot.



Printed on **RECYCLED** Paper
DHEC OR-0443 9/06

**CERTIFICATION
TRAINING**

**for
MUNICIPAL SOLID
WASTE LANDFILL
MANAGERS**

**at the
S.C. Association
of Counties Facility
Columbia, SC**

November 14-17, 2006



ABOUT THE TRAINING...

Certification Training for Municipal Solid Waste (MSW) Landfill Managers for 2006 will be held in April at the S.C. Association of Counties facility at 1919 Thurmond Mall in Columbia.

The primary goal of the training is to provide individuals who work as MSW landfill and MSW incinerator ash landfill operators a certification program designed to improve operational practices at their landfills. The training will increase awareness of the impact that the operational practices have on human health, safety and the environment.

Participants will gain insight on:

- operating a facility that is safe for employees and customers;
- maintaining regulatory compliance and environmental integrity at the facility;
- operating profitably and/or cost effectively; and
- improving industry standards through better operation by well-trained solid waste management professionals.

Participants successfully completing the course and examination will fulfill the requirements of R.61-107.14, Solid Waste Management: Municipal Solid Waste Landfill Operator's Certification.



QUESTIONS & ANSWERS

Q. What is a MSW landfill manager?

A. A MSW landfill manager is the person(s) with the responsibility for the overall management of a specific MSW facility site or shift.

Q. My facility is not a MSW landfill. Why did I receive this brochure?

A. Mandatory training for all types of landfill operators likely will be required in the near future. Since the majority of the current course topics apply to all landfill applications, the S.C. Department of Health and Environmental Control (DHEC) recommends that all landfill operators take advantage of this training opportunity.

For additional information, call Pete Stevens at (803) 896-4149, fax at (803) 896-4001 or e-mail at stevenpf@dhec.sc.gov.

REGISTRATION FORM

Each class will be limited to 40 participants. During the registration process, preference will be given to MSW landfill employees. The remaining slots will be filled in the order the registration forms are received. Registrations and fees must be received **no later than October 31, 2006.**

Lunch, snacks and refreshments will be provided each day with one exception – no lunch will be provided on the final day. Class participants are responsible for making their own lodging accommodations.

Last Name: _____

First Name: _____

Social Security Number (required for State Employees):

Employer: _____

Employer Mailing Address:

City: _____

State: _____ Zip: _____

Continued on the back

Detach and Return